

POSITION	INITIALS	IS NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.M.	917	3/2 63-813-01
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/13/02
2	✓	✓	2/10/02
3	✓	✓	2/10/02
4	✓	✓	2/10/02
5	✓	✓	2/10/02
6	✓	✓	2/10/02
7	✓	✓	2/10/02
8	✓	✓	2/10/02
9	✓	✓	2/10/02
10	✓	✓	2/10/02
11	✓	✓	2/10/02
12	✓	✓	2/10/02
13	✓	✓	2/10/02
14	✓	✓	2/10/02
15	✓	✓	2/10/02
16	✓	✓	2/10/02
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47	✓	✓	2/10/02
48	✓	✓	2/10/02
49	✓	✓	2/10/02
50	✓	✓	2/10/02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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CP  
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